



CITY OF BRUNSWICK

1 W. Potomac Street • Brunswick, Maryland 21716 • (301) 834-7500

FENCE ZONING CERTIFICATE

Applicant: _____

Property Owner: _____

Property Address: _____ Phone: _____

Mailing Address _____

(All issued Zoning Certificates will be mailed to the Mailing Address)

Tax Map/Parcel/Lot #: _____ Zoning District: _____

Do you live on a corner lot? _____ Proposed Fence Material: _____

Proposed Fence Height: _____

I hereby certify that:

- 1) I am authorized to make this application; and
- 2) The information contained herein is correct; and
- 3) I have conformed with the zoning certificate application requirements as stated in Article 6 of the Brunswick Zoning Ordinance, and that the above referenced fence will be located and erected in accordance with the fence requirements as stated in Article 5 of the Brunswick Zoning Ordinance; and
- 4) I am in full compliance with all other applicable City of Brunswick and Frederick County regulations; and
- 5) I understand that only improvements specifically described in this application may occur as a result of the issued permit; and
- 6) I understand that deviations from the specifications as submitted is sufficient grounds for revocation of the zoning certificate; and
- 7) I understand that the Brunswick Public Works Department must have access to the property for the maintenance and repair of utility lines, and that the fence could be relocated at the expense of the property owner if that access is necessary; and
- 8) I understand that the City of Brunswick will not be liable if, in the event of two conflicting certified surveys, a property line dispute occurs regarding the placement of the fence.

Signature of Applicant

Date

FOR OFFICE USE ONLY:

ZC#: _____ Fee Paid: _____

Issued By: _____ Date: _____

Conditions: _____